

Form 1120 Department of the Treasury Internal Revenue Service	U.S. Corporation Income Tax Return For calendar year 2003 or tax year _____	OMB No. 1545-0047 2003	
beginning _____, ending _____			
A Check if a:			
1 Consolidated return (attach Form 990) <input checked="" type="checkbox"/> Use IRS label.			
2 Personal holding co. (attach Sch. PH) <input type="checkbox"/> Otherwise, print or type.			
3 Personal service corp. (as defined in Regs. sec. 1.441-3(a)) <input type="checkbox"/>			
Name SPORTS SHINKO (USA) CO., LTD. & SUBS			
Number, street, and room or suite no. (If a P.O. box, see page 7 of instructions.) 99-994 IWAENA STREET STE C			
City or town, state, and ZIP code AIEA, HI 96701			
B Employer identification number _____			
C Date incorporated 08/05/1987			
D Total assets (see page 8 of instructions) _____			
E Check applicable boxes: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input checked="" type="checkbox"/> Address change			
Income	1 a Gross receipts or sales		1c
	2 Cost of goods sold (Schedule A, line 8)		2
	3 Gross profit. Subtract line 2 from line 1c		3
	4 Dividends (Schedule C, line 18)		4
	5 Interest		5
	6 Gross rents		6
	7 Gross royalties		7
	8 Capital gain net income (attach Schedule D (Form 1120))		8
	9 Net gain or (loss) from Form 4797, Part II, line 18 (attach Form 4797)		9
	10 Other income (attach schedule) SEE CONSOLIDATED INCOME AND DEDUCTIONS		10
	11 Total income. Add lines 3 through 10		11
Deductions	12 Compensation of officers (Schedule E, line 4)		12
	13 Salaries and wages (less employment credits)		13
	14 Repairs and maintenance		14
	15 Bad debts		15
	16 Rents		16
	17 Taxes and licenses		17
	18 Interest		18
	19 Charitable contributions		19
	20 Depreciation (attach Form 4562)		20
	21 Less depreciation claimed on Schedule A and elsewhere on return		21a
	22 Depletion		22
	23 Advertising		23
	24 Pension, profit-sharing, etc., plans		24
	25 Employee benefit programs		25
	26 Other deductions (attach schedule) SEE CONSOLIDATED INCOME AND DEDUCTIONS		26
	27 Total deductions. Add lines 12 through 26		27
	28 Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11		28
29 Less: a Net operating loss (NOL) deduction		29a	
b Special deductions (Schedule C, line 20)		29b	
30 Taxable income. Subtract line 29c from line 28		30	
Tax and Payments	31 Total tax (Schedule J, line 11)		31
	32 Payments: a 2002 overpayment credited to 2003		32a
	b 2003 estimated tax payments		32b
	c Less 2003 refund applied for on Form 4486		32c
	d Total		32d
	e Tax deposited with Form 7004		32e
	f Credit for tax paid on undistributed capital gains (attach Form 2439)		32f
	g Credit for Federal tax on fuels (attach Form 4136). See instructions		32g
	33 Estimated tax penalty (see page 14 of instructions). Check if Form 2220 is attached		33
	34 Tax due. If line 32h is smaller than the total of lines 31 and 33, enter amount owed		34
	35 Overpayment. If line 32h is larger than the total of lines 31 and 33, enter amount overpaid		35
	36 Enter amount of line 35 you want credited to 2004 estimated tax. Refunded		36
Sign Here			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Signature of officer _____ Date _____ Title _____			
Preparer's signature Doreen L. Griffith Date 9/7/04 Check if self-employed <input type="checkbox"/> Preparer's SSN or PTIN _____			
Firm's name (or yours if self-employed), address, and ZIP code GRANT THORNTON LLP 1132 BISHOP STREET SUITE 1000 HONOLULU, HI 96813			
Phone no. (808) 536-0066			